

Questions for RFP #88

Transitional Age Youth Program

1. In the bidder conference call, DSS staff mentioned that the Transition Age Youth program budget will be required to pay the state match portion of Medicaid services to clients. However, this requirement was not discussed at all in the RFP. Please confirm DSS's expectations regarding which specific state Medicaid matches the program budget will be expected to cover:

- a. Case management?
- b. Outpatient mental health counseling?
- c. Psychiatry services?
- d. Medication management?
- e. Psychotropic medications?
- f. Substance abuse evaluations?
- g. Outpatient substance abuse treatment?
- h. Inpatient substance abuse treatment?
- i. Psychiatric hospitalization?
- j. Other medical care, such as preventive health, doctor visits, injuries, physical illnesses, non-psychotropic medications, emergency room visits, hospitalization?

The awardee will not be required to pay a state Medicaid match portion. Up to \$545,160 was allocated to support services to this population. This amount would include all services and supports needed as described in the RFP. However, it is anticipated that there will be a rate for the supported housing/independent living skills and a separate rate for the Medicaid eligible mental health services. How the payment is structured will be dependent on the awardee and how the services will be provided. Psychiatric in-patient, substance abuse services and other medical care will not be funded through this program. If those needs arise, current funding streams will be accessed.

2. Given the client group that DSS plans to refer to this program, what is DSS's estimate of the average amount of services expected per youth per year in each of the above categories? What is the match amount for each unit of these services? If DSS expects that the Transition Age Youth program budget will cover the state Medicaid match, the estimates on amount of service and match required will be an essential factor in developing a workable program budget.

We anticipate this population will need intensive mental health services however that may vary by client. Please refer to the response to question 1 regarding Medicaid match.

3. Will DSS be willing to place a limit on the amount of state Medicaid match that will be expected to be paid from the Transition Age Youth program's budget? What is the State's contingency plan if there are youth with unusually severe or catastrophic needs that would make the program's financial footing unsustainable?

Please refer to the response to question 1 regarding state Medicaid match. The state will work with the awardee to ensure referrals are appropriate for the transition program. Clients will be living independently and catastrophic needs that may arise will be addressed through available community funding/resources.

4. What will be the method for tracking and paying match for these Medicaid services? Will that be a payment to DSS or to the respective service providers?

Please refer to the response to question 1.

5. If a youth is absent from the program for an extended period of time, either voluntarily or in the hospital/inpatient substance abuse treatment, how long would DSS expect the youth's bed to be held? Would this be different for youth who absent themselves voluntarily than for youth who are hospitalized or in inpatient treatment? When the program transitions in

upcoming years to being paid a daily rate, what is the State's plan for paying the daily rate for days when youth are absent from the program?

This is a pilot program, and the Division of Behavioral Health is willing to review this piece with the selected provider keeping in mind that the residence is the youth's home.

6. What will be the methodology for establishing the reimbursement rate beyond the initial award? If the Transition Age Youth provider needs to make a significant capital investment in order to accommodate the desired housing model, it will be important to determine if the ongoing reimbursement will provide for adequate recognition of costs to recover the initial investment.

Reimbursement rates will be established after the provider is selected. Proposals could include information regarding accommodating the desired housing model for consideration.

7. Does DSS expect that clients will buy their own food after their first week of residence in the program?

Once employment is obtained by the client, the client shall be responsible. However, the program will monitor the client to ensure their health and safety. The goal is to work with the youth so they develop the independent living skills needed to transition into their own living environment including purchasing and preparing meals.

8. Will DSS permit the Transition Age Youth program to charge a reasonable amount of rent to clients, with the rental income used to support the program's occupancy costs? Would DSS permit rent to be charged if the rent amount is held in savings for the client, to be returned upon discharge to help with the client's deposits and supplies for their own apartment in the community?

The Division of Behavioral Health would support rent to be charged to the client if the total amount charged to the client is placed in a savings account and returned to the client upon discharge.